State of Washington **Decision Package**

Department of Social and Health Services

DP Code/Title: PL-UT Comprehensive Assessment Tool

Program Level - 040 Div of Developmntl Disab

Budget Period: 2003-05 Version: D2 040 2003-05 2004 Sup-Agency Req

Recommendation Summary Text:

This decision package requests funding for the development and implementation of an assessment tool to be used for all Division of Developmental Disabilities (DDD) clients in making determinations of clients need for services. Statewide result number 5.

Fiscal Detail:

Operating Expenditures	<u>FY 1</u>	<u>FY 2</u>	Total
Program 040			
001-1 General Fund - Basic Account-State	253,000	996,000	1,249,000
001-C General Fund - Basic Account-DSHS Medicaid Federa	253,000	996,000	1,249,000
Total Cost	506,000	1,992,000	2,498,000
<u>Staffing</u>	<u>FY 1</u>	<u>FY 2</u>	Annual Avg
Program 040 FTEs	1.0	6.0	3.5

Package Description:

The division is responding to Joint Legislative Audit and Review Committee (JLARC) audit findings of June 19, 2003 regarding the need to achieve consistent assessments for all clients for all services. Currently, DDD case managers use a combination of assessment tools, both paper and automated that are not directly tied to service authorization and payment. There is also not a current statewide screening and prioritization process that adequately addresses the workload issue.

A comprehensive assessment solution would be delivered in three phases:

Phase I

In Phase I the current Adult Medicaid Personal Care (MPC) assessment within the Comprehensive Assessment Reporting and Evaluation (CARE) tool will be deployed to assess children. At the same time, help screens will be developed and deployed with age appropriate information that will assist DDD Case Resource Managers (CRMs) and Children's Administration Social Workers to administer the current CARE assessment with adaptations for age appropriate scoring.

The interim deployment would achieve two goals:

- 1. Invaluable data would be gathered that would help with construction of age appropriate adaptations to the CARE Screens and algorithms that will be completed in Phase II.
- 2. The Children's MPC assessment process will be brought into line with current Washington Administrative Code.

Phase II

Phase II would be comprised of the following deliverables:

Children's MPC Assessment.

A new age-appropriate assessment would be developed. The data gathered in Phase I would be used to adjust the underlying rates and algorithms of CARE to meet children's needs. CARE screens will be modified, to meet the specific needs of children.

The Screening/Prioritizing Assessment.

A new DDD brief assessment would be built into CARE. It would assess clients for emergencies; identify client needs in DDD program areas; screen potential clients into inactive status or prioritize clients for a full CARE assessment. All DDD clients who are not currently receiving services will receive a Screening/Prioritizing Assessment.

Extended Adult Assessment

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Currently all DDD adult clients who are MPC eligible are assessed in CARE. During Phase II, DDD clients who are prioritized to receive full assessments would be assessed in CARE whether they qualify for MPC or not. The data gathered in the Extended Adult Assessment of non MPC adults will be analyzed with the results of the Screening/Prioritizing Assessment in order to develop rates and algorithms for the complete Adult Assessment in Phase III.

Common Client Data Base (CCDB) Link with CARE

During Phase III a two-way electronic link between the client demographics of CARE and CCDB would be developed in order to assure clean and non-duplicated client information.

Phase III

Phase III would produce final assessment products for DDD. Additional work in Phase III will include:

- 1. A completed children's assessment. Assessment screens and underlying rates and algorithms will be added to the children's MPC assessment to assess for need in all children's non MPC services and programs.
- 2. A completed Adult Assessment. Assessment screens and underlying rates and algorithms will be added to the Adult MPC assessment to assess for need and eligibility for all non-MPC Adult Services and Programs.

Narrative Justification and Impact Statement

How contributes to strategic plan:

This proposal supports goals to assure that DSHS clients live as independently as possible. The goal of Assessment and Case Management Services in Aging and Disability Services Administration (ADSA) is to:

- · Increase the ability of the frail elderly, and persons with disabilities to live in the least restrictive setting, preferably in their own homes.
- \cdot We also strive to increase the number of developmentally disabled clients who are able to stabilize their lives through employment.

Performance Measure Detail

Program: 040

Cool. 16I	Develop IT Supports for a Case Management System	Incremental Changes	
Guai. 10		FY 1	<u>FY 2</u>
Output	Measures		
D01	Develop a case management system to enhance and support	1	0
	the division's mission.		

Reason for change:

DDD is responding to a JLARC audit indicating the need for DSHS to develop an assessment process for DD clients that is consistently applied to all clients in all parts of Washington State. Clients must be assessed before a determination of service need is made. JLARC indicated DSHS should utilize to the extent possible existing computer-based tools within the department. ADSA/Management Services Division will work with DDD to modify the CARE tool, currently being used to assess Medicaid Personal Care adult clients. The CARE tool will be modified, along with appropriate WACs and business processes to respond to the JLARC audit to develop and implement a consistent assessment process for all DDD clients for all services, including a screening and prioritization process.

Impact on clients and services:

JLARC, in its final report of June 19, 2003 found that "Case Managers in this division work with clients with complex needs. Caseloads are growing; procedures are poorly defined; and effective automated systems to help case managers manage their caseloads are missing" and "because an assessment process is not consistently applied, it is impossible to determine if clients

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with similar needs are receiving similar services."

The Screening and Comprehensive assessment components of this decision package will bring consistency to service authorization and prioritization. While it is the intention of this implementation to "grandfather" those currently receiving services, we expect that Advocacy and stakeholder groups will question the prioritization and capitation methodologies that would be implemented in this proposal.

Impact on other state programs:

Not applicable

Relationship to capital budget:

Not applicable

Required changes to existing RCW, WAC, contract, or plan:

A new WAC will need to be developed for the prioritization of clients for a comprehensive assessment of need. Modifications may need to be made for the WAC that covers Medicaid Personal Care so that it more effectively addresses age related issues for children.

A series of new Medicaid waivers have been submitted to the Centers for Medicare and Medicaid Services (CMS) for approval to replace the current Community Alternatives Program (CAP) waiver. When approved, eligibility for the waivers will be built into the CARE DDD automated assessments.

Alternatives explored by agency:

The fact that a consistent assessment process is essential for the division and its clients has been well documented in audits by JLARC, Sterling and Associates, and CMS.

Aging and Disability Services Administration, Long-Term Care services will have completely implemented its new Comprehensive Assessment Tool, CARE, by February of 2004. The Division of Developmental Disabilities is already using this tool for its adult clients who qualify for Medicaid Personal Care.

After exploring assessment systems in other states, it is clear that adapting ADSA's CARE tool to meet the needs of children and all DDD adult clients presents the most cost effective and reliable solution.

Budget impacts in future biennia:

Fiscal Year 2006 costs are anticipated to be \$1,156,000 (\$578,000 general fund - state). This will fund the final implementation phase for the Comprehensive Assessment Tool.

Distinction between one-time and ongoing costs:

All of the dollars requested here are for one-time funding to build necessary assessment and screening tools. No additional funding will be needed once the Comprehensive Assessment Tool is fully implemented in Fiscal Year 2006 (see costs above).

Effects of non-funding:

The division does not currently have an adequate system to manage caseload, assess individuals for need in a fair and reliable manner and account for the appropriate expenditure of state resources on client's behalf.

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The Legislature has mandated the division to remedy these deficits but it cannot do so without funding.

Expenditure Calculations and Assumptions:

See attachment - DDD PL-UT Comprehensive Assessment Tool.xls

Object D	<u> Detail</u>		<u>FY 1</u>	<u>FY 2</u>	Total
Prograi	m 040 Objects				
Α	Salaries And Wages		52,000	346,000	398,000
В	Employee Benefits		11,000	71,000	82,000
E	Goods And Services		398,000	1,537,000	1,935,000
G	Travel		3,000	12,000	15,000
J	Capital Outlays		40,000	20,000	60,000
Т	Intra-Agency Reimbursem	nents	2,000	6,000	8,000
		Total Objects	506,000	1,992,000	2,498,000
Program 04	-1, General Fund - Basic Ad	ccount-State	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
0011	General Fund State		253,000	996,000	1,249,000
		Total for Fund 001-1	253,000	996,000	1,249,000
Fund 001- Source	·	ccount-DSHS Medicaid Federa			
19UL	Title XIX Admin (50%)		253,000	996,000	1,249,000
		Total for Fund 001-C	253,000	996,000	1,249,000
		Total Program 040	506,000	1,992,000	2,498,000